

Senate Study Bill 1195

SENATE/HOUSE FILE _____
BY (PROPOSED DEPARTMENT OF
PUBLIC HEALTH BILL)

Passed Senate, Date _____ Passed House, Date _____
Vote: Ayes _____ Nays _____ Vote: Ayes _____ Nays _____
Approved _____

A BILL FOR

1 An Act relating to entities and activities regulated by the Iowa
2 department of public health, including the practices of
3 optometry and mortuary science, establishment of a state
4 public health dental director and an oral health bureau,
5 membership on the child death review team, and immunity for
6 emergency response, and providing for the revision of fees.
7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
8 TLSB 1213XD 82
9 nh/cf/24

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1 1 DIVISION I
1 2 OPTOMETRY
1 3 Section 1. Section 154.1, Code 2007, is amended to read as
1 4 follows:
1 5 154.1 OPTOMETRY == DIAGNOSTICALLY CERTIFIED LICENSED
1 6 OPTOMETRISTS == THERAPEUTICALLY CERTIFIED OPTOMETRISTS.
1 7 1. For the purpose of this subtitle the following classes
1 8 of persons shall be deemed to be engaged in the practice of
1 9 optometry:
1 10 ~~1- a.~~ Persons employing any means other than the use of
1 11 drugs, medicine, or surgery for the measurement of the visual
1 12 power and visual efficiency of the human eye; persons engaged
1 13 in the prescribing and adapting of lenses, prisms, and contact
1 14 lenses; and persons engaged in the using or employing of
1 15 visual training or ocular exercise; for the aid, relief, or
1 16 correction of vision.
1 17 ~~2- b.~~ Persons who allow the public to use any mechanical
1 18 device for ~~such a~~ purpose described in paragraph "a".
1 19 ~~3- c.~~ Persons who publicly profess to be optometrists and
1 20 to assume the duties incident to ~~said the~~ profession.
1 21 2. ~~Certified~~ Diagnostically certified licensed
1 22 optometrists may employ cycloplegics, mydriatics, and topical
1 23 anesthetics as diagnostic agents topically applied to
1 24 determine the condition of the human eye for proper optometric
1 25 practice or referral for treatment to a person licensed under
1 26 chapter 148, 150, or 150A. A diagnostically certified
1 27 licensed optometrist is an optometrist who is licensed to
1 28 practice optometry in this state and who is certified by the
1 29 board of optometry examiners to use diagnostic agents. ~~A~~
~~1 30 certified licensed optometrist shall be provided with a~~
~~1 31 distinctive certificate by the board which shall be displayed~~
~~1 32 for viewing by the patients of the optometrist.~~
1 33 3. Therapeutically certified optometrists may employ all
1 34 diagnostic and therapeutic pharmaceutical agents for the
1 35 purpose of diagnosis and treatment of conditions of the human
2 1 eye and adnexa pursuant to this paragraph subsection,
2 2 excluding the use of injections other than to counteract an
2 3 anaphylactic reaction, and notwithstanding section 147.107,
2 4 may without charge supply any of the above pharmaceuticals to
2 5 commence a course of therapy. Therapeutically certified
2 6 optometrists may prescribe oral steroids for a period not to
2 7 exceed fourteen days without consultation with a primary care
2 8 physician. Therapeutically certified optometrists shall not
2 9 prescribe oral Imuran or oral Methotrexate. Therapeutically
2 10 certified optometrists may be authorized, where reasonable and
2 11 appropriate, by rule of the board, to employ new diagnostic
2 12 and therapeutic pharmaceutical agents approved by the United
2 13 States food and drug administration on or after July 1, 2002,
2 14 for the diagnosis and treatment of the human eye and adnexa.
2 15 The board shall not be required to adopt rules relating to

2 16 topical pharmaceutical agents, oral antimicrobial agents, oral
2 17 antihistamines, oral antiglaucoma agents, and oral analgesic
2 18 agents. Superficial foreign bodies may be removed from the
2 19 human eye and adnexa. The therapeutic efforts of a
2 20 therapeutically certified optometrist are intended for the
2 21 purpose of examination, diagnosis, and treatment of visual
2 22 defects, abnormal conditions, and diseases of the human eye
2 23 and adnexa, for proper optometric practice or referral for
2 24 consultation or treatment to persons licensed under chapter
2 25 148, 150, or 150A. A therapeutically certified optometrist is
2 26 an optometrist who is licensed to practice optometry in this
2 27 state and who is certified by the board of optometry examiners
2 28 to use the agents and procedures authorized pursuant to this
2 29 ~~paragraph subsection. A therapeutically certified optometrist~~
~~2 30 shall be provided with a distinctive certificate by the board~~
~~2 31 which shall be displayed for viewing by the patients of the~~
~~2 32 optometrist.~~

2 33 Sec. 2. Section 154.3, Code 2007, is amended to read as
2 34 follows:

2 35 154.3 LICENSE.

3 1 ~~1.~~ Every applicant for a license to practice optometry
3 2 shall:

3 3 ~~a. 1.~~ Be a graduate of an accredited school of optometry
3 4 ~~and meet requirements as established by rules of the board.~~

3 5 ~~b. 2.~~ Present an official transcript issued by an
3 6 accredited school of optometry.

3 7 ~~c. 3.~~ Pass an examination as determined by the board by
3 8 rule.

3 9 ~~2.~~ A person applying to be licensed as an optometrist
~~3 10 after January 1, 1980, shall also apply to be a certified~~
~~3 11 licensed optometrist and shall, in addition to satisfactorily~~
~~3 12 completing all requirements for a license to practice~~
~~3 13 optometry, satisfactorily complete a course consisting of at~~
~~3 14 least one hundred contact hours in pharmacology and receive~~
~~3 15 clinical training as it applies to optometry with particular~~
~~3 16 emphasis on the topical application of diagnostic agents to~~
~~3 17 the human eye for the purpose of examination of the human eye,~~
~~3 18 and the diagnosis of conditions of the human eye, at an~~
~~3 19 institution accredited by a regional or professional~~
~~3 20 accreditation organization which is recognized or approved by~~
~~3 21 the council on postsecondary accreditation or the United~~
~~3 22 States office of education.~~

3 23 ~~3.~~ A person licensed as an optometrist prior to January 1,
~~3 24 1980 who applies to be a certified licensed optometrist shall~~
~~3 25 first satisfactorily complete a course consisting of at least~~
~~3 26 one hundred contact hours in pharmacology as it applies to~~
~~3 27 optometry including clinical training as it applies to~~
~~3 28 optometry with particular emphasis on the topical application~~
~~3 29 of diagnostic agents to the human eye and possible adverse~~
~~3 30 reactions thereto, for the purpose of examination of the human~~
~~3 31 eye and the diagnosis of conditions of the human eye, provided~~
~~3 32 by an institution accredited by a regional or professional~~
~~3 33 accreditation organization which is recognized or approved by~~
~~3 34 the council on postsecondary accreditation or the United~~
~~3 35 States office of education, and approved by the board of~~
~~4 1 optometry examiners.~~

4 2 ~~4.~~ In addition to the examination required by subsection
~~4 3 1, paragraph "c", a person applying to be a certified licensed~~
~~4 4 optometrist shall also pass an examination prescribed by the~~
~~4 5 optometry examiners in the subjects of physiology and~~
~~4 6 pathology appropriate to the use of diagnostic pharmaceutical~~
~~4 7 agents and diagnosis of conditions of the human eye, and~~
~~4 8 pharmacology including systemic effects of ophthalmic~~
~~4 9 diagnostic pharmaceutical agents and the possible adverse~~
~~4 10 reactions thereto, authorized for use by optometrists by~~
~~4 11 section 154.1.~~

4 12 ~~5.~~ A person applying to be licensed as an optometrist
~~4 13 after January 1, 1986, shall also apply to be a~~
~~4 14 therapeutically certified optometrist and shall, in addition~~
~~4 15 to satisfactorily completing all requirements for a license to~~
~~4 16 practice optometry, satisfactorily complete a course as~~
~~4 17 defined by rule of the state board of optometry examiners with~~
~~4 18 particular emphasis on the examination, diagnosis and~~
~~4 19 treatment of conditions of the human eye and adnexa provided~~
~~4 20 by an institution accredited by a regional or professional~~
~~4 21 accreditation organization which is recognized or approved by~~
~~4 22 the council on postsecondary accreditation of the United~~
~~4 23 States office of education, and approved by the board of~~
~~4 24 optometry examiners. The rule of the board shall require a~~
~~4 25 course including a minimum of forty hours of didactic~~
~~4 26 education and sixty hours of approved supervised clinical~~

~~4 27 training in the examination, diagnosis and treatment of~~
~~4 28 conditions of the human eye and adnexa. The board may also,~~
~~4 29 by rule, provide a procedure by which an applicant who has~~
~~4 30 received didactic education meeting the requirements of rules~~
~~4 31 adopted pursuant to this subsection at an approved school of~~
~~4 32 optometry may apply to the board for a waiver of the didactic~~
~~4 33 education requirements of this subsection.~~

4 34 6. A person licensed in any state as an optometrist prior
~~4 35 to January 1, 1986, who applies to be a therapeutically~~
~~5 1 certified optometrist shall first satisfactorily complete a~~
~~5 2 course as defined by rule of the board of optometry examiners~~
~~5 3 with particular emphasis on the examination, diagnosis and~~
~~5 4 treatment of conditions of the human eye and adnexa provided~~
~~5 5 by an institution accredited by a regional or professional~~
~~5 6 accreditation organization which is recognized or approved by~~
~~5 7 the council on postsecondary accreditation of the United~~
~~5 8 States office of education, and approved by the board of~~
~~5 9 optometry examiners. The rule of the board shall require a~~
~~5 10 course including a minimum of forty hours of didactic~~
~~5 11 education and sixty hours of approved supervised clinical~~
~~5 12 training in the examination, diagnosis, and treatment of~~
~~5 13 conditions of the human eye and adnexa. Effective July 1,~~
~~5 14 1987, the board shall require that therapeutically certified~~
~~5 15 optometrists prior to the utilization of topical and oral~~
~~5 16 antiglaucoma agents, oral antimicrobial agents and oral~~
~~5 17 analgesic agents shall complete an additional forty-four hours~~
~~5 18 of education with emphasis on treatment and management of~~
~~5 19 glaucoma and use of oral pharmaceutical agents for treatment~~
~~5 20 and management of ocular diseases, provided by an institution~~
~~5 21 accredited by a regional or professional accreditation~~
~~5 22 organization which is recognized or approved by the council on~~
~~5 23 postsecondary accreditation of the United States office of~~
~~5 24 education, and approved by the board of optometry examiners.~~
~~5 25 Upon completion of the additional forty-four hours of~~
~~5 26 education, a therapeutically certified optometrist shall also~~
~~5 27 pass an oral or written examination prescribed by the board.~~
~~5 28 The board shall suspend the optometrist's therapeutic~~
~~5 29 certificate for failure to comply with this subsection by July~~
~~5 30 1, 1988.~~

5 31 The board shall adopt rules requiring an additional twenty
~~5 32 hours per biennium of continuing education in the treatment~~
~~5 33 and management of ocular disease for all therapeutically~~
~~5 34 certified optometrists. The department of ophthalmology of~~
~~5 35 the school of medicine of the state university of Iowa shall~~
~~6 1 be one of the providers of this continuing education.~~

6 2 7. A person licensed in any state as an optometrist prior
~~6 3 to January 1, 1986, who applies to be a therapeutically~~
~~6 4 certified optometrist shall also be required to qualify as a~~
~~6 5 certified licensed optometrist as defined in subsections 2, 3,~~
~~6 6 and 4.~~

6 7 8. In addition to the examination required by subsection
~~6 8 1, paragraph "c", a person applying to be a therapeutically~~
~~6 9 certified optometrist shall also pass an examination~~
~~6 10 prescribed by the board of optometry examiners in the~~
~~6 11 examination, diagnosis, and treatment of diseases of the human~~
~~6 12 eye and adnexa.~~

6 13 Sec. 3. Section 154.10, Code 2007, is amended to read as
6 14 follows:

6 15 154.10 STANDARD OF CARE.

6 16 1. A diagnostically certified licensed optometrist
6 17 employing diagnostic pharmaceutical agents as authorized by
6 18 section 154.1 shall be held to the same standard of care in
6 19 the use of such agents and in diagnosis as is common to
6 20 persons licensed under chapter 148, 150, or 150A in this
6 21 state.

6 22 2. A therapeutically certified optometrist employing
6 23 pharmaceutical agents as authorized by section 154.1 shall be
6 24 held to the same standard of care in the use of such agents
6 25 and in diagnosis and treatment as is common to persons
6 26 licensed under chapter 148, 150, or 150A in this state.

6 27 Sec. 4. Sections 154.4, 154.5, 154.6, and 154.7, Code
6 28 2007, are repealed.

6 29 DIVISION II
6 30 MORTUARY SCIENCE

6 31 Sec. 5. Section 156.1, subsection 6, Code 2007, is amended
6 32 to read as follows:

6 33 6. "Intern" means a person registered by the board to
6 34 practice mortuary science under the direct supervision of a
6 35 funeral director preceptor certified by the board.

7 1 Sec. 6. Section 156.1, subsection 7, paragraph d, Code
7 2 2007, is amended to read as follows:

7 3 d. ~~Embalming by disinfecting or preserving~~ dead human
7 4 bodies, entire or in part, by the use of chemical substances,
7 5 fluids, or gases in the body, or by the introduction of the
7 6 same into the body by vascular ~~or injections~~, hypodermic
7 7 injections, or by direct surface application into the organs
7 8 or cavities for the purpose of preservation or disinfection.

7 9 Sec. 7. Section 156.4, subsections 1 and 3, Code 2007, are
7 10 amended to read as follows:

7 11 1. The practice of a funeral director must be conducted
7 12 from a funeral establishment licensed by the board. The board
7 13 may specify criteria for exceptions to the requirement of this
7 14 subsection in rules.

7 15 3. Applications for the examination for a funeral
7 16 director's license shall be ~~in writing and~~ verified on a form
7 17 furnished by the board.

7 18 Sec. 8. Section 156.8A, Code 2007, is amended to read as
7 19 follows:

7 20 156.8A STUDENT PRACTICUM.

7 21 The board, by rule, shall provide for practicums in
7 22 mortuary science for students available through any school
7 23 accredited by the American board of funeral service education
7 24 ~~and shall regulate the registration, training, and fees for~~
7 25 ~~such practicums.~~

7 26 Sec. 9. Section 156.9, subsection 2, Code 2007, is amended
7 27 to read as follows:

7 28 2. In addition to the grounds stated in sections 147.55
7 29 and 272C.10, the board may revoke or suspend the license of,
7 30 ~~or otherwise discipline,~~ a funeral director for any one of the
7 31 following acts:

7 32 a. Knowingly misrepresenting any material matter to a
7 33 prospective purchaser of funeral merchandise, furnishings, or
7 34 services.

7 35 b. ~~Executing a death certificate or burial transit permit~~
8 1 ~~for use by anyone except a funeral director or a certified~~
8 2 ~~intern who is working under the direct supervision of a~~
8 3 ~~funeral director unless otherwise allowed under section~~
8 4 ~~144.32. A violation of chapter 144 related to the practice of~~
8 5 ~~mortuary science.~~

8 6 c. Knowingly aiding, assisting, procuring, advising, or
8 7 allowing a person to unlawfully practice mortuary science.

8 8 d. Willful or repeated violations of this chapter, or the
8 9 rules adopted pursuant to this chapter.

8 10 e. Conviction of any crime related to the practice of
8 11 mortuary science or implicating the licensee's competence to
8 12 safely perform mortuary science services, including but not
8 13 limited to a crime involving moral character, dishonesty,
8 14 fraud, theft, embezzlement, extortion, or controlled
8 15 substances, in a court of competent jurisdiction in this
8 16 state, or in another state, territory, or district of the
8 17 United States, or in a foreign jurisdiction. For purposes of
8 18 this paragraph, "conviction" includes a guilty plea, deferred
8 19 judgment, or other finding of guilt. A certified copy of the
8 20 judgment is prima facie evidence of the conviction.

8 21 Sec. 10. Section 156.10, Code 2007, is amended to read as
8 22 follows:

8 23 156.10 INSPECTION.

8 24 1. The director of public health shall inspect all places
8 25 where dead human bodies are prepared or held for burial,
8 26 entombment, or cremation, and shall adopt and enforce such
8 27 rules and regulations in connection with the inspection as
8 28 shall be necessary for the preservation of the public health.

8 29 2. ~~At~~ The Iowa department of public health shall assess an
8 30 inspection fee for each an inspection of a place where dead
8 31 human bodies are prepared for burial or cremation shall be
8 32 fifteen dollars per year, which shall be collected by the
8 33 director of public health. The fee shall be determined by the
8 34 department by rule.

8 35 Sec. 11. Section 156.15, subsection 2, paragraph a, Code
9 1 2007, is amended to read as follows:

9 2 a. ~~Been convicted of a felony or a misdemeanor involving~~
9 3 ~~moral turpitude any crime related to the practice of mortuary~~
9 4 ~~science or implicating the establishment's ability to safely~~
9 5 ~~perform mortuary science services, or if the applicant is an~~
9 6 ~~association, joint stock company, partnership, or corporation,~~
9 7 ~~that a managing officer or owner has been convicted of a~~
9 8 ~~felony or a misdemeanor involving moral turpitude such a~~
9 9 ~~crime, under the laws of this state, another state, or the~~
9 10 ~~United States.~~

9 11 Sec. 12. Section 156.13, Code 2007, is repealed.

9 12 DIVISION III

9 13 STATE PUBLIC HEALTH DENTAL DIRECTOR AND ORAL

HEALTH BUREAU ESTABLISHED

Sec. 13. NEW SECTION. 135.14 STATE PUBLIC HEALTH DENTAL DIRECTOR == DUTIES.

1. The position of state public health dental director is established within the department.

2. The dental director shall perform all of the following duties:

a. Plan and direct all work activities of the statewide public health dental program.

b. Develop comprehensive dental initiatives for prevention activities.

c. Evaluate the effectiveness of the statewide public health dental program and of program personnel.

d. Manage the oral health bureau including direction, supervision, and fiscal management of bureau staff.

e. Other related work as required.

Sec. 14. NEW SECTION. 135.15 ORAL HEALTH BUREAU ESTABLISHED == RESPONSIBILITIES.

An oral health bureau is established within the division of health promotion and chronic disease prevention of the department. The bureau shall be responsible for all of the following:

1. Providing population-based oral health services, including public health training, improvement of dental support systems for families, technical assistance, awareness-building activities, and educational services, at the state and local level to assist Iowans in maintaining optimal oral health throughout all stages of life.

2. Performing infrastructure building and enabling services through the administration of state and federal grant programs targeting access improvement, prevention, and local oral health programs utilizing maternal and child health programs, Medicaid, and other new or existing programs.

3. Leveraging federal, state, and local resources for programs under the purview of the bureau.

4. Facilitating ongoing strategic planning and application of evidence-based research in oral health care policy development that improves oral health care access and the overall oral health of all Iowans.

5. Developing and implementing an ongoing oral health surveillance system for the evaluation and monitoring of the oral health status of children and other underserved populations.

DIVISION IV

MISCELLANEOUS PROVISIONS

Sec. 15. Section 135.11, Code 2007, is amended by adding the following new subsection:

NEW SUBSECTION. 31. In consultation with the advisory committee for perinatal guidelines, develop and maintain the statewide perinatal program based on the recommendations of the American academy of pediatrics and the American college of obstetricians and gynecologists contained in the most recent edition of the guidelines for perinatal care, and shall adopt rules in accordance with chapter 17A to implement those recommendations. Hospitals within the state shall determine whether to participate in the statewide perinatal program, and select the hospital's level of participation in the program.

A hospital having determined to participate in the program shall comply with the guidelines appropriate to the level of participation selected by the hospital.

Sec. 16. Section 135.24, subsection 5, paragraph a, Code 2007, is amended to read as follows:

a. "Charitable organization" means a charitable organization within the meaning of section 501(c)(3) of the Internal Revenue Code ~~which has as its primary purpose the sponsorship or support of programs designed to improve the quality, awareness, and availability of chiropractic, dental, medical, pharmaceutical, nursing, optometric, psychological, social work, behavioral science, podiatric, physical therapy, occupational therapy, respiratory therapy, or emergency medical care services to children and to serve as a funding mechanism for provision of chiropractic, dental, medical, pharmaceutical, nursing, optometric, psychological, social work, behavioral science, podiatric, physical therapy, occupational therapy, respiratory therapy, or emergency medical care services, including but not limited to immunizations, to children in this state.~~

Sec. 17. Section 135.43, subsection 2, unnumbered paragraph 1, Code 2007, is amended to read as follows:

The membership of the review team is subject to the provisions of sections 69.16 and 69.16A, relating to political

11 25 affiliation and gender balance. Review team members who are
11 26 not designated by another appointing authority shall be
11 27 appointed by the director of public health ~~in consultation~~
~~11 28 with the director of human services.~~ Membership terms shall
11 29 be for three years. A membership vacancy shall be filled in
11 30 the same manner as the original appointment. The review team
11 31 shall elect a chairperson and other officers as deemed
11 32 necessary by the review team. The review team shall meet upon
11 33 the call of the chairperson, upon the request of a state
11 34 agency, or as determined by the review team. The members of
11 35 the team are eligible for reimbursement of actual and
12 1 necessary expenses incurred in the performance of their
12 2 official duties.

12 3 Sec. 18. Section 135.43, subsection 5, Code 2007, is
12 4 amended to read as follows:

12 5 5. a. The following individuals shall designate a liaison
12 6 to assist the review team in fulfilling its responsibilities:

12 7 ~~a.~~ (1) The director of public health.

12 8 ~~b.~~ (2) The director of human services.

12 9 ~~c.~~ (3) The commissioner of public safety.

12 10 ~~d.~~ The administrator of the bureau of vital records of the
~~12 11 Iowa department of public health.~~

12 12 ~~e.~~ (4) The attorney general.

12 13 ~~f.~~ (5) The director of transportation.

12 14 ~~g.~~ (6) The director of the department of education.

12 15 b. In addition, the chairperson of the review team shall

12 16 designate a liaison from the public at large to assist the
12 17 review team in fulfilling its responsibilities.

12 18 Sec. 19. NEW SECTION. 135.147 IMMUNITY FOR EMERGENCY AID
12 19 == EXCEPTIONS.

12 20 1. The state and its departments, employees, and agents
12 21 are immune from liability for the death of or injury to a
12 22 person, or for damage to property, resulting from the
12 23 performance of a function or activity pursuant to this
12 24 division or chapter 29C, except for an act or omission which
12 25 involves intentional misconduct or a knowing violation of the
12 26 law.

12 27 2. A person, corporation, or other legal entity, or an
12 28 employee or agent of such person, corporation, or entity, who,
12 29 during or in preparation for a public health disaster, in good
12 30 faith renders emergency care or assistance to a victim of the
12 31 public health disaster shall not be liable for civil damages
12 32 for causing the death of or injury to a person, or for damage
12 33 to property, except in the event of recklessness or willful
12 34 misconduct.

12 35 3. The immunities provided in this section shall not apply
13 1 to any person, corporation, or other legal entity, or an
13 2 employee or agent of such person, corporation, or entity,
13 3 whose act or omission caused in whole or in part the public
13 4 health disaster and who would otherwise be liable therefor.

13 5 Sec. 20. Section 135I.4, subsection 5, Code 2007, is
13 6 amended to read as follows:

13 7 5. Adopt rules in accordance with chapter 17A for the
13 8 implementation and enforcement of this chapter, and the
13 9 establishment of fees. ~~The department shall appoint an~~

~~13 10 advisory committee composed of owners, operators, local~~
~~13 11 officials, and representatives of the public to advise it in~~
~~13 12 the formulation of appropriate rules.~~

13 13 Sec. 21. Section 135I.6, Code 2007, is amended to read as
13 14 follows:

13 15 135I.6 ENFORCEMENT.

13 16 If the department or a local board of health acting
13 17 pursuant to agreement with the department determines that a
13 18 provision of this chapter or a rule adopted pursuant to this
13 19 chapter has been or is being violated, the department may
13 20 withhold or revoke the registration of a swimming pool or spa,

~~13 21 or~~ the department or the local board of health may order that
13 22 a facility or item of equipment not be used, until the
13 23 necessary corrective action has been taken. The department or
13 24 the local board of health may request the county attorney to
13 25 bring appropriate legal proceedings to enforce this chapter,
13 26 including an action to enjoin violations. The attorney
13 27 general may also institute appropriate legal proceedings at
13 28 the request of the department. This remedy is in addition to
13 29 any other legal remedy available to the department or a local
13 30 board of health.

13 31 Sec. 22. Section 135M.4, subsection 1, paragraph d, Code
13 32 2007, is amended to read as follows:

13 33 d. The prescription drug or supplies are prescribed by a
13 34 health care practitioner for use by an eligible individual and
13 35 are dispensed by a pharmacist or are dispensed to an eligible

14 1 individual by the prescribing health care practitioner or the
14 2 practitioner's authorized agent.

14 3 Sec. 23. Section 139A.13A, subsection 1, Code 2007, is
14 4 amended to read as follows:

14 5 1. An employer shall not discharge an employee, or take or
14 6 fail to take action regarding an employee's promotion or
14 7 proposed promotion, or take action to reduce an employee's
14 8 wages or benefits for actual time worked, due to the
14 9 compliance of an employee with a quarantine or isolation order
14 10 or voluntary confinement request issued by the department, ~~or~~
14 11 a local board, or the centers for disease control and
14 12 prevention of the United States department of health and human
14 13 services.

14 14 Sec. 24. Section 144.28, subsection 1, Code 2007, is
14 15 amended to read as follows:

14 16 1. The medical certification shall be completed and signed
14 17 by the physician in charge of the patient's care for the
14 18 illness or condition which resulted in death within
14 19 seventy-two hours after receipt of the death certificate from
14 20 the funeral director or individual who initially assumes
14 21 custody of the body, except when inquiry is required by the
14 22 county medical examiner. If upon inquiry into the death, the
14 23 county medical examiner determines that a preexisting natural
14 24 disease or condition was the likely cause of death and that
14 25 the death does not affect the public interest as described in
14 26 section 331.802, subsection 3, the county medical examiner may
14 27 elect to defer to the physician in charge of the patient's
14 28 preexisting condition the certification of the cause of death.
14 29 When inquiry is required by the county medical examiner, the
14 30 medical examiner shall investigate the cause of death and
14 31 shall complete and sign the medical certification within
14 32 seventy-two hours after determination of the cause of death.

14 33 Sec. 25. Section 144.46, Code 2007, is amended to read as
14 34 follows:

14 35 144.46 ~~SEE FOR COPY OF RECORD FEES.~~

15 1 1. The department by rule shall establish fees based on
15 2 the average administrative cost which shall be collected by
15 3 the state registrar or the county registrar for each of the
15 4 following:

15 5 a. A certified copy or short form certification of
15 6 certificates or records, or for a certificate or record.

15 7 b. A search of the files or records when no copy is made,
15 8 or when no record is found on file.

15 9 c. A copy of a certificate or record or a vital statistics
15 10 data file provided to a researcher in accordance with section
15 11 144.44.

15 12 d. A copy of a certificate or record or a vital statistics
15 13 data file provided to a federal, state, local, or other public
15 14 or private agency for statistical purposes in accordance with
15 15 section 144.45.

15 16 e. Verification or certification of vital statistics data
15 17 provided to a federal, state, or local governmental agency
15 18 authorized by rule to receive such data.

15 19 2. Fees collected by the state registrar and by the county
15 20 registrar on behalf of the state under this section shall be
15 21 deposited in the general fund of the state and the vital
15 22 records fund established in section 144.46A in accordance with
15 23 an apportionment established by rule. Fees collected by the
15 24 county registrar pursuant to section 331.605, subsection 6,
15 25 shall be deposited in the county general fund. ~~A fee shall~~
15 26 ~~not be collected from a political subdivision or agency of~~
15 27 ~~this state.~~

15 28 Sec. 26. Section 144.46A, subsections 2 and 3, Code 2007,
15 29 are amended to read as follows:

15 30 2. ~~The department shall adopt rules providing for an~~
15 31 ~~increase in the fees charged by the state registrar for vital~~
15 32 ~~records services under section 144.46 in an amount necessary~~
15 33 ~~to pay for the purposes designated in subsection 1.~~

15 34 3. ~~2. Increased fees collected by the state registrar~~
15 35 ~~pursuant to this section shall be credited to the vital~~
16 1 ~~records fund.~~ Moneys credited to the fund pursuant to section
16 2 144.46 and otherwise are appropriated to the department to be
16 3 used for the purposes designated in subsection 1.

16 4 Notwithstanding section 8.33, moneys credited to the fund that
16 5 remain unencumbered or unobligated at the close of the fiscal
16 6 year shall not revert to any fund but shall remain available
16 7 for expenditure for the purposes designated.

16 8 Sec. 27. Section 152.1, subsection 4, paragraph c, Code
16 9 2007, is amended to read as follows:

16 10 c. Make the pronouncement of death for a patient whose
16 11 death is anticipated if the death occurs in a licensed

16 12 hospital, a licensed health care facility, a
16 13 Medicare-certified home health agency, ~~or~~ a Medicare-certified
16 14 hospice program or facility, or an assisted living facility or
16 15 residential care facility, with notice of the death to a
16 16 physician and in accordance with any directions of a
16 17 physician.
16 18 Sec. 28. Section 152.1, subsection 6, paragraph e, Code
16 19 2007, is amended to read as follows:
16 20 e. Make the pronouncement of death for a patient whose
16 21 death is anticipated if the death occurs in a licensed
16 22 hospital, a licensed health care facility, a
16 23 Medicare-certified home health agency, ~~or~~ a Medicare-certified
16 24 hospice program or facility, an assisted living facility, or a
16 25 residential care facility, with notice of the death to a
16 26 physician and in accordance with any directions of a
16 27 physician.

16 28 EXPLANATION

16 29 This bill relates to entities and activities regulated by
16 30 the Iowa department of public health.
16 31 DIVISION I == OPTOMETRY. The bill eliminates various Code
16 32 provisions relating to requirements for licensure as an
16 33 optometrist and provides that the board of optometry examiners
16 34 shall establish requirements for licensure by rule. The bill
16 35 specifies that certain optometrists are diagnostically
17 1 certified to distinguish them from optometrists who are
17 2 therapeutically certified. A requirement that certified
17 3 optometrists be provided with a distinctive certificate which
17 4 is to be displayed for viewing by the optometrist's patients
17 5 is eliminated.
17 6 DIVISION II == MORTUARY SCIENCE. The bill makes various
17 7 changes relating to the practice of mortuary science. The
17 8 bill modifies the definition of "intern" to require such
17 9 persons to be directly supervised by a preceptor certified by
17 10 the board of mortuary science examiners. A description of
17 11 embalming procedures utilized in the practice of mortuary
17 12 science is amended to provide that chemical substances,
17 13 fluids, or gases may be introduced into the body by surface,
17 14 rather than direct, application into the organs or cavities.
17 15 A provision requiring the practice of a funeral director to
17 16 be conducted from an establishment licensed by the board is
17 17 amended to allow the board to specify exceptions to the
17 18 requirement in rules. The bill eliminates provisions
17 19 requiring that an application for examination for a funeral
17 20 director's license be in writing, allowing electronic
17 21 submission; requiring the board to regulate registration,
17 22 training, and fees for mortuary science practicums, which are
17 23 regulated by certain mortuary science schools; and allowing
17 24 the department, with the approval of the board, to accept
17 25 certain national certificates of examination in lieu of the
17 26 examination prescribed by the board.
17 27 The bill allows the board to discipline a licensed funeral
17 28 director other than by license revocation or suspension and
17 29 makes changes in the permissible grounds for revocation or
17 30 suspension. The bill provides that such grounds include
17 31 violations of Code chapter 144 (vital statistics) relating to
17 32 the practice of mortuary science and convictions of crimes
17 33 related to the practice of mortuary science or implicating the
17 34 licensee's competence to safely perform mortuary science
17 35 services. The bill similarly modifies the grounds for
18 1 revocation of a funeral or cremation establishment's license
18 2 based on a criminal conviction and adds an owner of such a
18 3 funeral or cremation establishment to the list of persons and
18 4 entities who may commit such a crime causing the revocation or
18 5 suspension.
18 6 The \$15 annual fee for funeral and cremation establishment
18 7 inspections is replaced by an inspection fee to be established
18 8 by the department by rule.
18 9 DIVISION III == DENTAL AND ORAL HEALTH. The bill
18 10 establishes the position of state public health dental
18 11 director and the oral health bureau within the department.
18 12 The state public health dental director is directed to plan
18 13 and direct all activities of the statewide public health
18 14 dental program, develop comprehensive dental initiatives for
18 15 prevention activities, evaluate the effectiveness of the
18 16 dental program and of program personnel, and manage the oral
18 17 health bureau.
18 18 The oral health bureau is responsible for providing
18 19 population-based oral health services at the state and local
18 20 level, performing infrastructure building and enabling
18 21 services, facilitating ongoing strategic planning and
18 22 application of research in oral health care policy development

18 23 that improves access and the overall oral health of Iowans,
18 24 and developing and implementing an oral health surveillance
18 25 system for the evaluation and monitoring of the oral health
18 26 status of underserved populations.

18 27 DIVISION IV == MISCELLANEOUS PROVISIONS. The bill codifies
18 28 provisions enacted in 1998 directing the department to develop
18 29 and maintain the statewide perinatal program.

18 30 A definition of "charitable organization" for purposes of
18 31 the volunteer health care provider program is amended to
18 32 remove the specific purposes such an organization must have,
18 33 leaving the reference to the definition in the Internal
18 34 Revenue Code.

18 35 The bill makes several changes to the membership of the
19 1 child death review team. The bill eliminates a requirement
19 2 that the director of public health consult with the director
19 3 of human services in making appointments to the review team
19 4 and replaces a liaison to the review team designated by the
19 5 administrator of the bureau of vital records with an at-large
19 6 liaison designated by the chairperson of the review team.

19 7 The bill provides legal immunity for the state and its
19 8 departments, employees, and agents for the death of or injury
19 9 to a person, or for damage to property, resulting from the
19 10 performance of a function or activity relating to public
19 11 health disasters or states of emergency proclaimed by the
19 12 governor. However, an act or omission that involves
19 13 intentional misconduct or a knowing violation of the law is
19 14 not provided such immunity. The bill also provides legal
19 15 immunity for persons and entities, or employees or agents of
19 16 such persons or entities, who in good faith render emergency
19 17 care or assistance during a public health disaster to a victim
19 18 of such disaster. Such immunity does not apply in the event
19 19 of recklessness or willful misconduct or to a person or
19 20 entity, or employee or agent of such person or entity, whose
19 21 act or omission caused the public health disaster and who
19 22 would otherwise be liable therefor.

19 23 A provision requiring the department to appoint an advisory
19 24 committee relating to the regulation of swimming pools and
19 25 spas is eliminated in the bill. The bill allows the
19 26 department to withhold or revoke the registration of a
19 27 swimming pool or spa for a violation of the laws or rules
19 28 regulating pools and spas until the necessary corrective
19 29 action has been taken.

19 30 The bill extends isolation and quarantine employment
19 31 protection for persons who voluntarily comply with a
19 32 confinement request issued by the department, a local board of
19 33 health, or the federal centers for disease control and
19 34 prevention.

19 35 The bill allows a county medical examiner to defer to the
20 1 physician in charge of a patient's preexisting condition the
20 2 certification of the cause of death if the medical examiner
20 3 determines that a preexisting natural disease or condition was
20 4 the likely cause of death and that the death does not affect
20 5 the public interest.

20 6 Provisions regarding the fees for certain vital records
20 7 copies and services are amended in the bill. The bill
20 8 provides that the department shall establish fees by rule for
20 9 copies of certain vital records documents provided to
20 10 researchers and public and private agencies and for
20 11 verification or certification of vital statistics data
20 12 provided to a governmental agency authorized by rule to
20 13 receive such data. The bill eliminates a provision exempting
20 14 political subdivisions and agencies of the state from payment
20 15 of vital records fees.

20 16 The bill also provides that such fees collected by the
20 17 state registrar and by the county registrar on behalf of the
20 18 state shall be deposited in the general fund of the state and
20 19 the vital records fund, in an apportionment established by
20 20 rule. Currently, such fees are deposited in the general fund
20 21 of the state, with the exception of that portion of the fees
20 22 attributed to the 2005 increase in such fees, which is to be
20 23 deposited in the vital records fund, to be used for purposes
20 24 of the purchase and maintenance of an electronic system for
20 25 vital records scanning, data capture, data reporting, storage,
20 26 and retrieval, and for all registration and issuance
20 27 activities.

20 28 In addition, provisions relating to the scope of practice
20 29 of licensed practical nurses and registered nurses are amended
20 30 to include making a pronouncement of death for a patient whose
20 31 death is anticipated if the death occurs in an assisted living
20 32 or residential care facility, with notice of the death to a
20 33 physician and in accordance with any directions of a

20 34 physician. Currently, such nurses may make a pronouncement of
20 35 death if the death occurs in a licensed hospital, a licensed
21 1 health care facility, a Medicare-certified home health agency,
21 2 or a Medicare-certified hospice program or facility.
21 3 LSB 1213XD 82
21 4 nh:rj/cf/24.2